Please fill out the form below and email it back to us. A reference form on page 2 is below the order form so you can see what is available.

Do not fill out the reference form on page 2.

EMAIL TO: PERSONIUSWARNE@GMAIL.COM

Parent Name:		
Student Name:		
Pre-School:		
Group:	Teacher	
Item Ordered:		
Price: \$		
All orders will be shipped.	Enclose \$10.00 for shipping	ng/handling.
	Order amount \$	
	Shipping	\$10.00
Tot	tal amount charged \$	
Credit Card (minimum §	520.00 purchase)	
Number		
Expiration date		
Name on card		
Billing address		
Zip code	CVV code	
[[

A \$45 8x10 composite of group and individual 2-8x10 2-5x718-Wallets

of individual

and individual + 1-5x7

B \$35

8x10 composite of group 2 - 3x518-Wallets

of individual

8x10 composite of group and individual 4-3x5

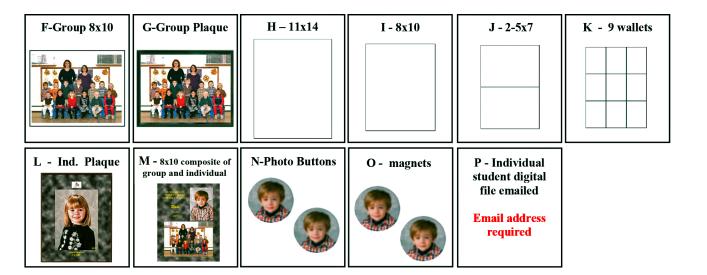
9-Wallets

of individual

C \$25

8x10 composite of group and individual 1 - 3x56-Wallets of individual

D \$20



Personius-Warne Studio PO Box 922 Elmira NY 14902 607-733-6563

No substitutions in packages or individual prints allowed.

	ourchase) Put this in envelope
Number	
Expiration date	Phone
Name on card	
Billing address	
Zip code	CVV code

Complete order information

Please fill in all information below PLEASE PRINT

School -

	Student				
	Parents Name				
	Phone #				
	Parents Email				
	Teacher				
	Class				
				Qty	Price
es	Package A		\$45		\$
Packages	Package B		\$35		\$
ack	Package C		\$25		\$
Ь	Package D		\$20		\$
	Group 8x10	F	\$20		\$
	Group Plaque	$\bar{\mathbf{G}}$	\$25		\$
	(1)11x14	Н	\$25		\$
nts	(1)8x10	Ī	\$20		\$
ρij	(2) 5x7	$\bar{\mathbf{J}}$	\$20		\$
12	(9) wallets	K	\$20		\$
Individual prints	(1) Individual Plaque	L	\$25		\$
	Deluxe Memory Mate	M	\$20		\$
	(2) photo buttons	N	\$20		\$ \$
	(2) photo magnets	O	\$20		\$
	Individual on CD	P	\$20		JP

Cash or make checks payable to: Total \$

Personius Warne

Credit Cards